SCJA 29			FINANCIAL A UPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTH MAGISTRATE VIDISTRICT APPEALS COURT OF	FFIDAVIT ER COURT SERVICES WITHOUT PAYMENT OF FEE OTHER PANEL (Specify below)
IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT of DISTRICT LOCATION NUMBER LOCATION NUMBER				
			Kovin Vickers	, I
<u></u>	USA	v.s	AT AT	
I				
PERSON REPRESENTED (Show your full name)			(Show your full name)	1 X Defendant—Adult DOCKET NUMBERS 2 Defendant - Juvenile Magistrate 3 Appellant
				4 Probation Violator District Court
CHARGE/OFFENSE (describe if applicable & check x Felony Misdemeanor				5 Parole Violator
				6 ☐ Habeas Petitioner Court of Appeals 7 ☐ 2255 Petitioner
			i varactirestiron	8 Material Witness
	1,550			9 Other
ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY				
			Are you now Yes No 1	Am Self-Employed
		EMPLOY- MENT	Name and address of employer:	
			IF YES, how much do you	IF NO, give month and year of last employment
			earn per month? \$	How much did you earn per month? \$
			If married is your Spouse employed?	
			IF YES, how much does your	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
			Spouse earn per month? \$	a business, profession or other form of self-employment, or in the form of
ASSETS		OTHER INCOME	the form of rent payments, interest, dividends, retirement or ann	nuity payments, or other sources? Yes No
			RECEIVED	SOURCES
			IF YES, GIVE THE AMOUNT	
			RECEIVED & IDENTIFY \$	
		CASH	Have you any cash on hand or money in savings or checking account	ints? Yes No IF YES, state total amount \$
		CASII		
		PROP- ERTY	Do you own any real estate, stocks, honds, notes, automobiles, or o	other valuable property (excluding ordinary household furnishings and
			clothing)? Yes No VALUE	DESCRIPTION
			IF YES, GIVE THE VALUE AND \$	
			DESCRIBE IT	
			-	
			MADITAL STATUS Total	List persons you actually support and your relationship to them
		MARITAL STATUS SINGLE MARRIED WIDOWED SEPARATED OR DIVORCED		List persons you actually support and your relationship to them.
OBLIG & DEBT		- 1	APARTMENT C	reditors Total Debt Monthly Paymt.
W DEB :			OR HOME: /N Carcerest	-l
		(LI IN LO	SILLS IST ALL CREDITORS, (\$ \$
			ICLUDING BANKS, DAN COMPANIES, HARGE ACCOUNTS,	\$ \$
			HARGE ACCOUNTS, TC.)	
I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)				
SIGNATURE OF DEFENDANT				
(OR PERSON REPRESENTED)				